

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
<b>FEE DETERMINATION</b>			
<b>O.I.P.E. CLASSIFIER</b>			
<b>FORMALITY REVIEW</b>	TH	1118	7-9-01
<b>RESPONSE FORMALITY REVIEW</b>	U	875	8-15-01
			0118/02

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 + ..... Restricted O ..... Objected

Claim	Final	Original	Date
1	✓	THE	
2		10/27/01	
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15	✓	✓	
16	✓	✓	
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22	0	0	
23	✓	✓	
24	✓	-	
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If more than 150 claims or 10 actions  
staple additional sheet here

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CC553/MC  
8/15/01  
JC-571  
01/22/02